## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#737614** 

FILED Jan 12, 2006 Secretary of State

Entity Name: FLORIDA VAN COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business:

2137 NORTH HAMPTON CIRCLE WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

2137 NORTH HAMPTON CIRCLE WINTER PARK, FL 32792

FEI Number: 59-1976666 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CINNINGHAM, JOHN M.
2137 NORTH HAMPTON CIRCLE
WINTER PARK, FL 32792 US

CUNNINGHAM, JOHN M.
2137 NORTH HAMPTON CIRCLE
WINTER PARK, FL 32792 US

WINTER PARK, FL 32792 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN M. CUNNINGHAM 01/12/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: SD ()Delete Title: ()Change ()Addition

 Name:
 CUNNINGHAM, JOHN M,
 Name:

 Address:
 2137 NORTH HAMPTON CIR
 Address:

 City-St-Zip:
 WINTER PARK, FL 32792
 City-St-Zip:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 STUMPF, RUSSELL
 Name:
 CAPPS, CALE

 Address:
 683 CENTER STREET
 Address:
 339 E BERESFO

Address: 683 CENTER STREET Address: 339 E BERESFORD AVE. City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: DELAND, FL 32724

Title: TD () Delete Title: () Change () Addition

 Name:
 MORRIS, LINARD
 Name:

 Address:
 12931 SW 10TH CT
 Address:

 City-St-Zip:
 DAVIE, FL 33325
 City-St-Zip:

 $\label{eq:title: VD () Delete Title: VD (X) Change () Addition} Title: VD (X) Change () Addition$ 

 Name:
 CAROLYN, PUCEL
 Name:
 PATTON, CAROLYN

 Address:
 PO BOX 320113
 Address:
 PO BOX 320113

 City-St-Zip:
 COCOA BEACH, FL 32952
 City-St-Zip:
 COCOA BEACH, FL 32932

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN M. CUNNINGHAM SD 01/12/2006